



TRANSMITTAL FORM			Application No.	10/602,810		
			Filing Date	June 24, 2003		
(to be used for all correspondence after initial filing)			First Named Inventor	Ki Chul An		
			Art Unit	2614		
			Examiner Name	Binh Kien Tieu		
Total Number of Pa	ages in This Submission	11	Attorney Docket Number	r 7937P043		
ENCLOSURES (check all that apply)						
Fee Transmittal Form		Drawing(s)		After Allowance Communication to TC		
Fee Attack	Fee Attached		elated Papers	Appeal Communication to Board of Appeals and Interferences		
Amendment / Re	eply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After Final Affidavits/declaration(s)		Petition to Convert a Provisional Application		Proprietary Information		
Extension of Time Request		Power of Attorney, Revocation Change of Correspondence Address		Status Letter		
Express Abandonment Request		Terminal Disclaimer		Other Enclosure(s) (please identify below):		
Information Disclosure Statement		Request for Refund return postcard				
PTO/SB/08		CD, Number of CD(s)				
Certified Copy of Priority Document(s)		Landscape Table on CD				
Response to Missing Parts/ Incomplete Application		Remarks				
	c Filing Fee aration/POA					
Response Parts und 1.52 or 1.5	e to Missing er 37 CFR 53					
	SIGNATUR	E OF APPLICA	NT, ATTORNEY, OR A	GENT		
Firm or	Life 5. Hyman, Reg. No. 50,159					
Individual name						
Signature	Signature					
Date	Date William ()					
CERTIFICATE OF MAILING/TRANSMISSION						
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.						
Typed or printed n						
Signature Wells		a Ste		Date パンチッフ		

FEETRANSMITTAL for FY 2007 Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.								
TOTAL AMOUNT OF PAYMENT	(\$)	120.0						

Complete if Known					
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Attorney Docket No.	7937P043				

METHOD	METHOD OF PAYMENT (check all that apply)						
Check [Check □ Credit card □ Money Order □ None □ Other (please identify):						
Deposit A	Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.							
FEE CALCU	_ATION						
Large Er	ntity	Small	Entity				
Fee	Fee	Fee	Fee	Fac Description	F D-:-		
Code	(\$)	Code	(\$)	Fee Description	Fee Paid		
1051	130	2051	65	Surcharge - late filing fee or oath			
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.			
2053	130	2053	130	Non-English specification			
1251	120	2251		Extension for reply within first month	120.00		
1252	460	2252		Extension for reply within second month			
1253	1,050	2253		Extension for reply within third month			
1254	1,640	2254	820	Extension for reply within fourth month			
1255	2,230	2255	1,115	Extension for reply within fifth month			
1401	510	2401	255	Notice of Appeal			
1402	510	2402	255	Filing a brief in support of an appeal			
1403	1,030	2403	515	Request for oral hearing			
1451	1,510	2451	1,510	Petition to institute a public use proceeding			
1460	130	2460		Petitions to the Commissioner			
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)			
1806	180	1806		Submission of Information Disclosure Stmt			
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.129(a))			
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))			
Other f	ee (spe	cify) _					
				SUBTOTAL (2)	120.00		

SUBMITTED BY Complete (if applicable)						
Name (Print/Type)	Eric S. Hyman	/ 10	Registration No. (Attorney/Agent)	30,139	Telephone	(310) 207-3800
Signature		NR			Date	11/78/07